

# CLAIMS ONLY

SERIAL NO. \_\_\_\_\_

FILING DATE \_\_\_\_\_

APPLICANT(S) \_\_\_\_\_

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/				/	
2	1				1	
3	1				1	
4	1				1	
5	1				1	
6	1					
7	1					
8	X					
9						
10	1					
11	1				1	
12	1				1	
13	1				1	
14	1				1	
15	1				1	
16	1				1	
17	1					
18						
19						
20						
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48						
49						
50						
TOTAL IND.	1	1	1	1	1	1
TOTAL DEP.	10	10	10	10	10	10
TOTAL CLAIMS	12					

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54						
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99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS